IN THE CLAIMS

Please cancel claims 1-47. Please add claims 48-65. A complete listing of pending claims is provided below.

Listing of claims

1-47. (Canceled)

48. (New) A method for delivering implant material into tissue using a cannula comprising a cannula body having a first opening and a second opening proximal to the first opening, and a plunger slidably disposed within a lumen of the cannula body, the method comprising:

inserting the cannula body into a distal section of a tissue;

perfusing the implant material out of the first opening into the tissue;

proximally displacing the plunger from a first position distal to the first opening into a second position between the first and second openings; and

perfusing the implant material out of the second opening into the tissue while the plunger is in the second position.

49. (New) The method of claim 48, further comprising severing a distal portion from a proximal portion of the cannula member.

50. (New) The method of claim 48, further comprising separating a distal portion from a proximal portion of the cannula member.

51. (New) The method of claim 48, wherein the implant material is longitudinally perfused out of the cannula body through the first opening, and transversely perfused out of the cannula body through the second opening.

52. (New) The method of claim 48, wherein the cannula body further comprises a third opening proximal to the second opening, the method further comprising:

proximally displacing the plunger into a third position between the second and third openings; and

perfusing the implant material out of the third opening into the tissue while the plunger is in the third position.

53. (New) The method of claim 48, wherein the implant material is bone cement.

54. (New) The method of claim 48, wherein the tissue is bone tissue.

55. (New) The method of claim 54, wherein the bone tissue is a vertebral body.

56. (New) A method for delivering implant material into tissue using a cannula comprising a cannula body having a proximal end, a distal end, one or more openings, the method comprising:

inserting the cannula body into tissue;

perfusing the implant material out of the one or more openings into the tissue; and

separating the proximal end from the distal end of the cannula body.

57. (New) The method of claim 56, wherein the implant material is bone cement.

58. (New) The method of claim 56, wherein the tissue is bone tissue.

59. (New) The method of claim 58, wherein the bone tissue is a vertebral body.

60. (New) The method of claim 56, wherein the one or more openings comprises a plurality of openings axially spaced from each other the method further comprising perfusing the implant material out of the plurality of openings into the tissue.

61. (New) The method of claim 56, wherein the cannula further comprises a plunger configured to be slidably disposed in a lumen of the cannula body, and the one or more openings comprises a first opening and a second opening proximal to the first opening, the method further comprising:

proximally displacing the plunger from a first position distal to the first opening into a second position between the first and second openings; and

perfusing the implant material out of the second opening into the tissue while the plunger is in the second position.

62. (New) The method of claim 56, wherein separating the proximal end from the distal end of the cannula body comprises detaching the cannula body by applying a shearing or twisting force.

63. (New) The method of claim 56, wherein separating the proximal end from the distal end of the cannula body comprises unscrewing the proximal end from the distal end.

64. (New) The method of claim 56, further comprising implanting the distal end of the cannula body within the tissue.

65. (New) The method of claim 56, wherein the distal end of the cannula body is composed of a biocompatible material.